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To:

14154847068

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future; annual report mailings. Enter only one email address please.

Email Address:	
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FLORIDA/FOREIGN LP/LLLP 184 Sunset Benchmark LP

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$1,061.25

S. ROBERTS

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Corporate Filing Menu

Help APR 2 2 2022

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

184 Sunset Benchman	rk LP		
Acceptable Limited Par	inership suffixes: Limited Partn	iability Limited Partnership, which must inclusership, Limited, L.P., LP, or Ltd. es: Limited Liability Limited Partnership, L.L.L.	
If name unavailable, n	ame under which the limited par business in Fk	tnership or limited liability limited partnership porida; must contain acceptable suffix.	roposes to register to transact
2. Delaware		3_ April 12, 2022	
	or Country of Formation	Date of Formatio	n
4. Federal Employer I	dentification Number: 88-1875	664	
	Agent for Service of Process 2		
Angelo & Banta, P.A.			
515 E Las Olas Bivd.,	Ste 850,		
Fort Lauderdale, FL 33	301		
6. I hereby accept the of all statutes relative my position as registed	e to the proper and complete pe	and agree to act in this capacity. I further agree rformance of my duties, and I am familiar with a	na accept the obligations of
	Sign	nature of Registered Agent	2022 APR 22
7. Principal Office: 8. i		8. Mailing Address:	P P
184 Sunset Avenue		20 E 69th Street, Suite 2A,	22 APR 22 I
Palm Beach, FL 33480		NY, NY 10021	10
			PH 4: 00
9. If limited partnersi	nip is a limited liability limited	partnership, check box.	00
	ffice address, and mailing add		
		Name of General Partner:	
Name of General Partner: Aaron Feldman Street Address: 20 E 69th Street, Suite 24 NY, NY 10021	0 E 69th Street, Suite 2A,	Street Address:	
· · · · · · · · · · · · · · · · · · ·	20 E 69th Street, Suite 2A,	Mailing Address:	
Name of General P	artner:	Name of General Partner:	
		Street Address:	
Mailing Address:_		Mailing Address:	

Page 1 of 2

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's re	after the date this document is filed by the Florida Department of State.) applicable statutory filing requirements, this date will not be listed as the ecords. ed, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction under
Signed this 21st day of April	20 22
Sig	nature of a general partner
The individual signing this document affirms that the fact submitted in a document to the Department of State const	ts stated herein are true and the individual is aware that false information titutes a third degree felony as provided for in s.817.155, F.S.
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 2 of 2

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "184 SUNSET BENCHMARK LP" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF APRIL, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "184 SUNSET BENCHMARK LP" WAS FORMED ON THE TWELFTH DAY OF APRIL, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203244213

Date: 04-22-22